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FEC FORM 2

STATEMENT OF CANDIDACY

| | | | | | | | = | | |
|--|---|----------------------------|-----------------|------------------|---------------------------------------|---|----------|--|--|
| 1. | (a) Name of Candidate (in full) | | | | | | | | |
| | Paul D. Ryan (b) Address (number and street) | ☐ Check if address changed | | | | 2. Candidate's FEC Identification Number | | | |
| | PO Box 771 | □ Check if address changed | | | H8WI01024 | | | | |
| | (c) City, State, and ZIP Code | | | | | 3. Is This New Amended | _ | | |
| | Janesville | | W | 5354 | 7-0771 | Statement (N) OR X (A) | | | |
| 4. | Party Affiliation | 5. Office Soug | - | | | trict of Candidate | | | |
| | REPUBLICAN PARTY | House | | | WI | 01 | _ | | |
| | DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | |
| 7. | I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) | | | | | | | | |
| | NOTE: This designation should be | filed with the ap | opropriate offi | ce listed in th | ne instructions. | | | | |
| | (a) Name of Committee (in full) | _ | | | | | | | |
| | Ryan for Congress, | Inc. | | | | | | | |
| | (b) Address (number and street) PO Box 1488 | | | | | | _ | | |
| | FO BOX 1400 | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | _ | | |
| | Janesville | | | | WI | 53547-1488 | | | |
| | | | | | | | _ | | |
| | DE | SIGNATIO | N OF OT | HER AU | THORIZED | COMMITTEES | | | |
| | DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | | | | | | | | |
| 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my | | | | | | | | | |
| | candidacy. | | , | 71 - 1. | 1.3 | , | | | |
| | NOTE: This designation should be filed with the principal campaign committee. | | | | | | | | |
| | (a) Name of Committee (in full) | | | | | | _ | | |
| | Team Ryan | | | | | | | | |
| | (b) Adduses (number and street) | | | | | | _ | | |
| | (b) Address (number and street) 2470 Daniels Bridge Road | | | | | | | | |
| | Suite 121 | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | _ | | |
| | Athens | | | | GA | 30606-6191 | | | |
| | | | | | | | _ | | |
| I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. | | | | | | | | | |
| Signature of Candidate | | | | | | Date | _ | | |
| Paul D. Ryan [Electronically Fi | | | | ronically Filed1 | 08/04/2016 | | | | |
| | | | | | | | | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| NO | DTE: Submission of false, erroneous | , or incomplete | information n | nay subject t | | ng this Statement to penalties of 2 U.S.C. §437g. | _ | | |
| NO | OTE: Submission of false, erroneous | , or incomplete | information n | nay subject t | | ng this Statement to penalties of 2 U.S.C. §437g. | <u>-</u> | | |
| NO | OTE: Submission of false, erroneous | , or incomplete | information n | nay subject t | | ng this Statement to penalties of 2 U.S.C. §437g. | _ | | |

FEC FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

| FEC Form 2 (Rev. 02/2003) | | Page 2 / 2 |
|--|---|----------------|
| DESIGN | ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | [ADDITIONAL] |
| I hereby authorize the following named committee, candidacy. | which is NOT my principal campaign committee, to receive and expend funds on | behalf of my |
| NOTE:This designation should be filed w | ith the principal campaign committee. | |
| (a) Name of Committee (in full) | | |
| Ryan-McCarthy Victory | | |
| (b) Address (number and street) 824 S Milledge Ave Ste 101 | | |
| (c) City, State and ZIP Code | 04 00005 | |
| Athens | GA 30605 | |
| DESIGN | IATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | [ADDITIONAL] |
| I hereby authorize the following named committee candidacy. | , which is NOT my principal campaign committee, to receive and expend funds on | behalf of my |
| NOTE: This designation should be filed w | vith the principal campaign committee. | |
| (a) Name of Committee (in full) | | |
| Ryan-Scalise Victory Fur | nd | |
| (b) Address (number and street) 320 First St, SE | | |
| (c) City, State and ZIP Code | | |
| Washington | DC 20003 | |
| DESIGN | ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | [ADDITIONAL] |
| I hereby authorize the following named committee candidacy. | , which is NOT my principal campaign committee, to receive and expend funds on | behalf of my |
| NOTE: This designation should be filed w | vith the principal campaign committee. | |
| (a) Name of Committee (in full) | | |
| (b) Address (number and street) | | |
| (c) City, State and ZIP Code | | |